



TRANSMITTAL FORM

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Total Number of Pages in This Submission

2

Application Number

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First Named Inventor

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Art Unit

2617

Examiner Name

Mizrahi, Diane D.

Attorney Docket Number

SIPS-VMS

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
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<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Attached is Replacement Sheet drawing Fig. 6. Also attached is a 3-month extension of time request.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature	/Guerry L. Grune/		
Printed name	Guerry L. Grune		
Date	July 30, 2009	Reg. No.	46,745

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